AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE	PAG	E OF	PAGES
				<u> </u>		1	3
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE			QUISITION/PURCHASE REQ. NO.	5. PROJEC	CT NO.	(If applicable)
P00002	See Bloo	JK 16C		115FB000001011.2	CODE L		
6. ISSUED BY CODE	ICE/DCR		7. AC	MINISTERED BY (If other than Item 6)	CODE	CE/	DCR
ICEDETENTION COMPLIANCE REM IMMIGRATION AND CUSTOMS ENFO OFFICE OF ACQUISITION MANAGE 801 I STREET NW SUITE 930 WASHINGTON DC 20536			IMM OFE 801	DETENTION COMPLIANCE RIGRATION AND CUSTOMS ENDICE OF ACQUISITION MANAGED IN STREET NW SUITE 930 CHINGTON DC 20536		ENT	
8. NAME AND ADDRESS OF CONTRACTOR (No., street	t, county, State and	ZIP Code) ((x) 9/	A. AMENDMENT OF SOLICITATION NO.			
SUFFOLK COUNTY OF ATTN SUFFOLK COUNTY OF DAN MARTINI CFO - FINANCIAL 20 BRADSTON STREET BOSTON MA 021182705	SERVIC	,	x A	DA. MODIFICATION OF CONTRACT/ORDER N CD-3-H-0007 SCEDM-15-F-IG016 DB. DATED (SEE ITEM 13)	0.		
CODE 6180434340000	FACILITY COL	DE	-1.	01/07/2015			
6180434340000				MENTS OF SOLICITATIONS			
separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an offer to the solicitation and this amendment, and is receive 12. ACCOUNTING AND APPROPRIATION DATA (If real See Schedule	e to the solicitation OFFERS PRIOR or already submit of prior to the open quired)	n and amendment numbe TO THE HOUR AND DA' ted, such change may be ning hour and date specifi Net	ors, F. ATE SI made fied.	PECIFIED MAY RESULT IN REJECTION OF YOU by telegram or letter, provided each telegram or	BE RECEIVEDUR OFFER retter make	/ED ATR. If by es reference 670	rence
B. THE ABOVE NUMBERED CONTRA appropriation date, etc.) SET FORT	CT/ORDER IS M H IN ITEM 14, PI	ODIFIED TO REFLECT T URSUANT TO THE AUTH	THE A	IGES SET FORTH IN ITEM 14 ARE MADE IN T DMINISTRATIVE CHANGES (such as changes Y OF FAR 43.103(b).			
C. THIS SUPPLEMENTAL AGREEMEN							
χ Unilateral Modificat	ion in a	ccordance wit	th 1	ACD-3-H-0007			
D. OTHER (Specify type of modification	and authority)						
				n 0 copies to the issuin	a office		
E. IMPORTANT: Contractor 🗵 is not,		to sign this document and					
DUNS Number: 618043434 COR: Donald Granahan, 781-35 Contracting Officer: Gervonn Contract Specialist: Musa Ka	9-7530, a Willia	ms, 202 732-2			o.e.)		
The purpose of this modification funding is estimated through obligated is increased: From	August	31, 2015. As	a :	result of this change, t	he tot		
The funding provided in this allotted to this task order.							
Continued							
Except as provided herein, all terms and conditions of the	he document refe	erenced in Item 9A or 10A					
15A. NAME AND TITLE OF SIGNER (Type or print)				NAME AND TITLE OF CONTRACTING OFFI	CER (Type o	or print)
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		UNITED STATES OF AMERICA	ml.	16	C. DATE SIGNED
(Signature of person authorized to sign)		l	1	Signature of Contracting Officers	' '	- 1 '	

NSN 7540-01-152-8070 Previous edition unusable STANBARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243

	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
CONTINUATION SHEET	ACD-3-H-0007/HSCEDM-15-F-IG016/P00002	2	3

NAME OF OFFEROR OR CONTRACTOR

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	1 1	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	not exceed the total amount currently allotted to the items funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted. Exempt Action: Y FOB: Destination Period of Performance: 02/01/2015 to 08/31/2015 Change Item 0001 to read as follows(amount shown				
0001	is the total amount): DETAINEE SERVICE	31303	EA	90.00	2,817,270.0
	Bed/Day rate is \$90.00 X 22,463 bedday = \$2,021,670.00	:			
	CLIN 0001 is increased as follows:				
	From: \$795,600.00 By: \$2,021,670.00 To: \$2,817,270.00				
	Quantity is increased as follows:				
	From: 8,840 By: 22,463 To: 31,303			<u>.</u>	
	Quantity: 5542 Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-25-71-00 000000 Funded: \$0.00				
	Quantity: 3298 Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-25-71-00 000000 Funded: \$0.00				
	Quantity: 22463 Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-25-71-00 Continued				

	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE (OF
CONTINUATION SHEET	ACD-3-H-0007/HSCEDM-15-F-IG016/P00002	3	3

NAME OF OFFEROR OR CONTRACTOR

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
(A)	000000	1	(5)	(6)	(1)
	Funded: \$2,021,670.00				
	Change Item 0003 to read as follows(amount shown is the total amount):	,			
003	PROCESSING AREA RENT	5	EA	15,000.00	75,000.0
	Processing Area Rent rate is \$15,000.00/month				
	CLIN 0003 is increased as follows:	1			
	From: \$30,000.00 By: \$45,000.00 To: \$75,000.00				
	Quantity is increased as follows:				
	From: 2 months By: 3 month To: 5 month				
	Quantity: 1 Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00 000000 Funded: \$0.00				
	Quantity: 1 Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00 000000 Funded: \$0.00				
	Quantity: 3 Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00 000000				
	Funded: \$45,000.00				
				1	